

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	CM-G		11/12/99
O.I.P.E. CLASSIFIER		49	11/17/99
FORMALITY REVIEW	CM	71632	11/30/99 12/14/99

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Best Available Copy

Claim	Date
Final Original	
1	10/23/99
2	10/23/99
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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